



THE USE OF VARIOUS DIAGNOSTIC MODALITIES FOR MANAGING A RARE CASE OF UTERINE PERFORATION POST SMM

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BACKGROUND

- ❑ Failure to detect uterine perforation during surgical abortion may result in adverse patient outcome besides having medico legal implications.
- ❑ This rare case of uterine perforation was diagnosed few days after abortion and underscores the importance of remaining vigilant for this complication during and after the procedure.

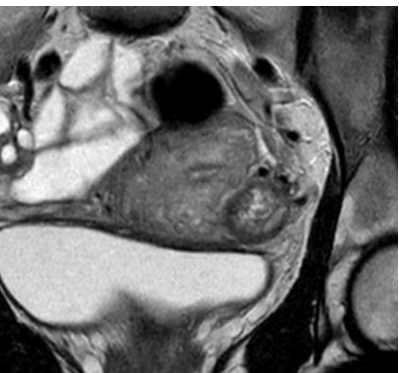
CASE REPORT

- ❑ 40 years old P0+1 presented with Left lower abdominal pain.
- ❑ H/O STOP (D&E) at 17 weeks for T21 at BPAS (failed MTOP).
- ❑ BPAS Op notes - Surgical management of miscarriage was done under continuous ultrasound guidance.

IMAGING – TVUSS

TVUSS- RPOC 20 x 24 mm outside uterus in left adnexa - 19.6mm echogenic area ?femur.

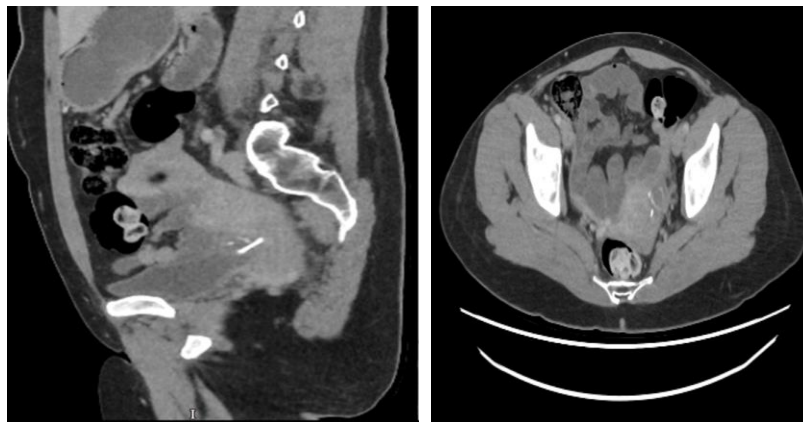
IMAGING MRI SCAN



MRI SCAN-

- ❖ No evidence of uterine rupture or perforation.
- ❖ A well-defined 2 cm rounded lesion near the lower body of uterus not suggestive of any perforation.

IMAGING CT SCAN



CT SCAN - a small false passage/perforation at the left side of the cervix through which the fetal femur protruded.

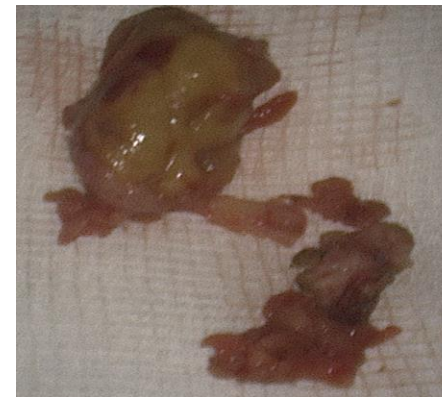
MULTIDISCIPLINARY PLAN OF ACTION

Diagnostic Laparoscopy & Hysteroscopy after a TVUSS pre-operatively mapping.

PER OP FINDINGS

- ❖ HYSTEROSCOPY - slightly bulky uterine cavity with RPOC but no bone visible. Gentle sharp curettage - bone not visible or felt.
- ❖ DIAGNOSTIC LAPAROSCOPY - area of bony Retained products of conception at the level of internal os. Peritoneum was reflected and RPOC removed and the defect thoroughly explored for any obvious communication into the endometrial cavity.

HISTOPATHOLOGICAL REPORT



HPE of POC -

- ❖ small numbers of necrotic chorionic villi and decidua with fragments of foetal bones and soft tissues.

CONCLUSION

- ❖ Continuous ultrasound guidance lowers the risk of perforation but does not remove it completely.
- ❖ TVUSS should be the first-line test, and it can characterise the contents of a collection as well as locate it.
- ❖ When TVUSS suggests possible perforation, CT may provide superior anatomical delineation compared with MRI.
- ❖ Combined Laparoscopy & Hysteroscopy with preoperative TVUSS mapping is the definitive approach in similar cases.

TAKE HOME MESSAGE

- ❑ Persistent pelvic pain after STOP warrants targeted imaging, as timely recognition of extrauterine fetal tissue can prevent delayed morbidity.